

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Committee for a Livable Future

ADDRESS (number and street)

830 NE Holladay Street

Room 105

☐ Check if different than previously reported. (ACC)

Portland

OR

97232

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00323352

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

☐ PRE-Election
Report for the:☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

☐ POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kathie Eastman Tell

Signature of Treasurer

Kathie Eastman Tell

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Committee for a Livable Future

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
11		01		2011

To:

M M	/	D D	/	Y Y Y Y Y
11		30		2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2011</td></tr></table>	Y	Y	Y	Y	Y	2011						<table><tr><td colspan="5">11974.75</td></tr></table>	11974.75				
Y	Y	Y	Y	Y													
2011																	
11974.75																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">52388.62</td></tr></table>	52388.62															
52388.62																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">20500.00</td></tr></table>	20500.00					<table><tr><td colspan="5">79315.00</td></tr></table>	79315.00									
20500.00																	
79315.00																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">72888.62</td></tr></table>	72888.62					<table><tr><td colspan="5">91289.75</td></tr></table>	91289.75									
72888.62																	
91289.75																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">20794.53</td></tr></table>	20794.53					<table><tr><td colspan="5">39195.66</td></tr></table>	39195.66									
20794.53																	
39195.66																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">52094.09</td></tr></table>	52094.09					<table><tr><td colspan="5">52094.09</td></tr></table>	52094.09									
52094.09																	
52094.09																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Committee for a Livable Future

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 11 / 01 / 2011

To:

 M M / D D / Y Y Y Y Y
 11 / 30 / 2011
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6000.00

21500.00

(ii) Unitemized

0.00

1065.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

6000.00

22565.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

27250.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

6000.00

49815.00

12. Transfers From Affiliated/Other

Party Committees.....

14500.00

29500.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20500.00

79315.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

20500.00

79315.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	794.53	17095.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	794.53	17095.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	22000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20794.53	39195.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20794.53	39195.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6000.00	49815.00
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6000.00	49715.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	794.53	17095.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	794.53	17095.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. John E. Bollier

Mailing Address 7616 SE 28th Ave

City

Portland

State

OR

Zip Code

97202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stacy & Witbeck, Inc

Occupation

Engineer Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2011

Transaction ID : C5044630A

Amount of Each Receipt this Period

5000.00

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2011

Transaction ID : C5044630AB

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

c. Nawzad Othman

Mailing Address 1118 SW Myrtle Drive

City

Portland

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Otak, Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2011

Transaction ID : C5044633A

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. Box 382110

City State Zip Code
 Cambridge MA 02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 13 2011

Transaction ID : C5044633AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. Blumenauer Century Fund

Mailing Address 830 NE Holladay, Suite 105

City State Zip Code
Portland OR 97232

FEC ID number of contributing
federal political committee.

C C00415992

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29500.00

Date of Receipt

11 / **15** / **2011**

Transaction ID : C5015443

Amount of Each Receipt this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Richard H. Parker Jr.

Mailing Address 515 East Burnside

City State Zip Code
Portland OR 97214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

United Group

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / **15** / **2011**

Transaction ID : C5015444

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Warren J. Rosenfeld

Mailing Address PO Box 10067

City State Zip Code
Portland OR 97296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Calbag Metals

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / **15** / **2011**

Transaction ID : C5015445

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 14

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. Eleanor St. Laurent

Mailing Address 120 NE 136th Ave

City State Zip Code
 Vancouver WA 98684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Interior Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 15 / 2011

Transaction ID : C5015447

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Georges C St. Laurent Jr.

Mailing Address 120 NE 136th Ave
 Ste 200

City State Zip Code
 Vancouver WA 98684-6964

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Laurent Properties

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 15 / 2011

Transaction ID : C5015446

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Blumenauer Century Fund

Mailing Address 830 NE Holladay, Suite 105

City State Zip Code
 Portland OR 97232

FEC ID number of contributing
federal political committee.

C C00415992

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29500.00

Date of Receipt

11 / 30 / 2011

Transaction ID : C5053598

Amount of Each Receipt this Period

11000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. Cheryl F. Coon

Mailing Address 2939 NW 53rd Ave.

City

Portland

State

OR

Zip Code

97210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Swanson Thomas & Coon

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 30 / 2011

Transaction ID : C5053602

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. James Coon

Mailing Address 2939 NW 53rd Dr

City

Portland

State

OR

Zip Code

97210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Swanson Thomas & Coon

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 30 / 2011

Transaction ID : C5053601

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Stephen R. McCarthy

Mailing Address 1646 NW 32nd Ave

City

Portland

State

OR

Zip Code

97210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clear Creek Distillery

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2011

Transaction ID : C5053603

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

14500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2011

Transaction ID : D314788

Amount of Each Disbursement this Period

237.00

Full Name (Last, First, Middle Initial)

B. Mandate Media, Inc.

Mailing Address 2014 SE 39th Ave

City	State	Zip Code
Portland	OR	97214-5912

Purpose of Disbursement
Web and Internet Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2011

Transaction ID : D314636

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. The McKenzie Group

Mailing Address 3311 NE Tillamook St.

City	State	Zip Code
Portland	OR	97212

Purpose of Disbursement
Bookkeeping Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2011

Transaction ID : D314637

Amount of Each Disbursement this Period

37.50

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

674.50

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. Bank Of America (Visa)

Mailing Address PO Box 53155

City	State	Zip Code
Phoenix	AZ	85072

Purpose of Disbursement
Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Transaction ID : D316128

Amount of Each Disbursement this Period

120.03

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

120.03

794.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH Ave.

City	State	Zip Code
Portland	OR	97214

Purpose of Disbursement
Contribution

Candidate Name

SUZANNE BONAMICIOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : D314785

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH Ave.

City	State	Zip Code
Portland	OR	97214

Purpose of Disbursement
Contribution

Candidate Name

SUZANNE BONAMICIOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: OR District: 01

Special General

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : D314786

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH Ave.

City	State	Zip Code
Portland	OR	97214

Purpose of Disbursement
Contribution (Debt Retirement)

Candidate Name

SUZANNE BONAMICIOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2011

☐ Primary ☐ General
☒ Other (specify) ▼

State: OR District: 01

Special Primary

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : D314787

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Comm.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

Purpose of Disbursement
Unlimited Transfer

Candidate Name

Category/
Type
Transaction ID : D316130

Amount of Each Disbursement this Period

5000.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

20000.00
